

CLAIMS ONLY							Application Number <b>10709166</b>	Filing Date		
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend				
1	1						51			
2		1					52			
3			1				53			
4				1			54			
5					1		55			
6	1						56			
7		1					57			
8			1				58			
9				1			59			
10		1					60			
11			1				61			
12				1			62			
13					1		63			
14						1	64			
15							65			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	2						Total Indep			
Total Depend	10	←	←	←			Total Depend	←	←	←
Total Claims	12						Total Claims			